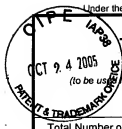


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TRANSMITTAL FORM

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| Application Number | 09/890,649 |
| Filing Date | October 26, 2001 |
| First Named Inventor | Michael W. DAHM |
| Art Unit | 1643 |
| Examiner Name | Karen A. Canella |
| Attorney Docket No. | 24741-1529 |

Total Number of Pages in This Submission

ENCLOSURES (Check all that apply)

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|---|--|--|
| <input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 (CFR) 1.52 or 1.53 | <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ | <input type="checkbox"/> After Allowance communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s), please identify below: Post card |
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

| | |
|-------------------------|---------------------------------------|
| Firm or Individual Name | Patricia D. Granados, Reg. No. 33,683 |
| Signature | <i>Patricia D. Granados</i> |
| Date | October 24, 2005 |

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

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This collection of information is required by 37 C.F.R. 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 C.F.R. 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions by reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Attorney Docket No.: 24741-1529

In re patent application of:
Michael W. DAHM *et al.*

Confirmation No. 5173

Serial No.: 09/890,649

Art Unit: 1643

Filed: October 26, 2001

Examiner: Karen A. Canella

For: METHOD FOR THE ENRICHMENT OR DEPLETION OF TUMOR CELLS FROM A
BODY FLUID AND KIT SUITABLE THEREFOR

**AMENDMENT AND REQUEST FOR RECONSIDERATION
UNDER 37 C.F.R. § 1.116**

Commissioner for Patents
P. O. Box 1450
Alexandria, VA 22313-1450

Sir:

Applicants herein respond to the Final Office Action mailed August 25, 2005 in the above-captioned patent application. A response is due November 25, 2005. Applicants believe that no fee is due at this time. However, in the event that any fees are due, the Commissioner is hereby authorized to credit any overpayment or to charge any deficiency to Deposit Account No. 08-1641. Accordingly, consideration of the amendments and remarks that follow is requested.

Please amend the application as follows: